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ABSTRACT

Empirical investigations relevant to Beck's theory have shown that depressives often experience a preponderance of negative cognitive attitudes towards themselves and their own performance. Many studies have brought out the direct relationship that exists between hopelessness and suicide behavior, although few studies from India have examined the relationship among suicide intent, hopelessness, and negative cognitive phenomena. This study examined this relationship; the cognitive phenomena was studied as it existed in high and low intent suicide attempters. Attempted suicides (N=45) were classified into groups of low and high intent categories. Subjects were administered the Hopelessness Scale and the Crandell Cognitions Inventory. The findings indicated significant differences in scores between the two groups on measures of hopelessness and cognitions, the high intent group being more hopeless and having more negative cognitions than the low intent group. Although the specific problems faced by the high intent attempters were different than those faced by attempters in the West, they all had in common the experience of pessimistic thoughts, negative cognitive phenomena, and a fairly severe degree of hopelessness. (Author/ABL)

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Suicide Intent, Hopelessness and Negative Cognitions in Attempted Suicide

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ABSTRACT

Forty five cases of attempted suicide from a general hospital in South India were classified into two groups of low intent and high intent categories based on their scores on The Suicide Intent Scale (Pierce D.W. 1977). They were administered The Hopelessness Scale (Beck et al., 1975) and the Crandell Cognitions Inventory (Crandell, Chambless, 1986). The findings indicated significant difference in scores between the two groups on measures of hopelessness and cognitions, the high intent group being more hopeless having more negative cognitions than the low intent group. The study helped to delineate the group which is at a high risk with regards to future suicide attempts, the group that needed intensive therapeutic intervention. The culture specific problems faced by some of the women in the sample were illustrated.

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SUICIDE INTENT, HOPELESSNESS AND NEGATIVE COGNITIONS IN ATTEMPTED SUICIDE

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INTRODUCTION

Empirical investigations relevant to Beck's theory (1976) have shown that depressives often experience a preponderance of negative cognitive attitudes towards themselves and their own performance (Grandell and LaPointe 1979). Many studies have brought out the direct relationship that exists between hopelessness and suicide behaviour (Beck, Kovacs, Weissman 1975, Kovacs, Beck, Weissman, 1975), Sivachidambaram, 1982). However, there are not many systematic studies from India that have attempted to bring out the relationship between suicide intent, hopelessness and negative cognitive phenomena. The present study is one such attempt, where the cognitive phenomena was studied as it existed in two groups of suicide attempters, the low intent group and the high intent group. Thus it is proposed to see:

1. Whether there is any significant difference between the low intent and high intent group on a measure of hopelessness.

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2. Whether there is any significant difference between the low intent and high intent group on measures of cognitive phenomena.

Sample

45 consecutive cases of attempted suicide admitted into the intensive care unit of a general Hospital in Madurai, India during the period September 1,1988 to September 30, 1988 formed the subjects of the study. There were 18 males and 27 females in the age range 15 to 58. 29 were in the younger age group of 34 and below and 16 in the order age group of 35 and above. Regarding their marital status, 18 were single, 25 married and 2 widowed. As regards the mode of attempt, there were 27 who consumed organophosphorus compounds, 12 sedatives, 3 attempted hanging and 1 drowning. As for the reasons of the attempt, physical illness accounted for 12, financial problems 9, marital discord 7, conflict with parents 5, alcoholism 7 and depression 5.

Method

The subjects were administered the suicide intent scale, a 12 item point rating scale which covers medical risk, circumstances and self-report relating to the attempt (Pierce D.W. 1977). Based on the score, the subjects were classified into two groups, the low intent group of those securing a score

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of 8 or below (N=21) and the high intent group of those securing a score of 9 and above (N=24). The cut off score of 9 was based on the mean scores obtained on the intent scale in two previous samples of 100 suicide attempters from the same institution - Mean 8.91 S.D. 4.99 (Chinnian and Krishnaram, 1980) Mean 9.20 S.D. 3.19 (Sivachidambaram, B. 1982). Both the groups were administered The Hopelessness scale (Beck, Weissman, Lester and Trexler, 1975) a 20 item scale, the score indicating the number of pessimistic answers given by the subject and The Crandell Cognitions Inventory (Crandell and Chambless, 1986), a 45 item point rating scale of which 34 items measure negative cognitive phenomena consisting of 4 factors, namely, detachment, self-rated inferiority, helplessness and hopelessness.

Results

An Anova conducted on the total sample did not reveal any difference on the biographical variable of sex in the three measures - suicidal intent, hopelessness and cognitions (Tables 1-3).

Table 1: Anova of suicidal intent scores between males and females

Group	Mean	SD	F Value	P Value
Male	10.33	4.52	0.11	NS
Female	9.85	4.90		

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Table 2: Anova of hopelessness Score between males and females

Group	Mean	SD	F Value	P Value
Male	7.10	7.05	0.04	NS
Female	8.02	7.74		

Table 3: Anova of cognitions scores between males and females.

Group	Mean	SD	F Value	P Value
Male	85.11	34.00	0.40	NS
Female	80.41	29.19		

Anova on the sample, however, revealed a significant difference on the biographical variable of age in all the three measures. The order age group of 35 and above had greater degree of suicidal intent, was more hopeless and had more negative cognitions than the younger age group of 34 and below. (Table 4-6).

Table 4: Anova of hopelessness scores between younger and older age groups.

Group	Mean	SD	F Value	P Value
34 and below	4.08	5.56	14.36	0.01
35 and above	11.03	5.95		

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Table 5: Anova of cognitions scores between younger and older age groups

Group	Mean	SD	F Value	P Value
34 and below	66.60	24.36	14.11	0.01
35 and above	98.94	25.43		

Anova conducted on the low intent and high intent groups indicated significant differences between the groups on hopelessness and cognitions and the four factors that constituted negative cognitions, namely, detachment, self rated inferiority, helplessness and hopelessness. The F Value was significant at 0.01 level in all the instances. The high intent group was more hopeless and had more negative cognitions than the low intent group (Table 7-12).

Table 6: Anova of hopelessness score between low intent and high intent group.

Group	Mean	SD	F Value	P Value
Low intent	2.43	2.89		
High intent	12.67	7.31	35.47	0.01

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Table 7 : Anova of cognitions score between low intent and high intent groups

Group	Mean	SD	F Value	P Value
Low intent	62.90	20.57		
High intent	102.63	27.19	27.20	0.01

Table 8 : Anova of Detachment factor scores between low intent and high intent groups

Group	Mean	SD	F Value	P Value
Low intent (N=21)	14.48	5.00		
High intent (N=24)	22.38	6.77	18.92	0.01

Table 9 : Anova of self rated inferiority factor scores between low intent and high intent groups

Group	Mean	SD	F Value	P Value
Low intent	17.62	5.74		
High intent	30.00	8.15	33.03	0.01

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Table 10: Anova of Helplessness factor scores between low intent and high intent group.

Group	Mean	SD	F Value	P Value
Low intent	17.38	5.55		
High intent	27.79	7.75	25.59	0.01

Table 11: Anova of Hopelessness factor scores between low intent and high intent groups.

Group	Mean	SD	F Value	P Value
Low intent	13.38	5.12		
High intent	22.46	5.81	29.84	0.01

Correlation coefficients obtained for intent scores, hopelessness scores and cognitions score for the total sample indicated fairly high positive correlation among the three variables (Table 13)

Table 13: Correlation coefficient between intent, hopelessness and cognitions scores.

	Variables	Value
Intent	Vs Hopelessness	0.70
Intent	Vs Cognitions	0.66
Hopelessness	Vs Cognitions	0.78

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DISCUSSION

The mean cognitions score of the high intent group corresponded to that of the depressed group in Crandell's study while the mean score of the low intent group compared with that of the non depressed psychiatric controls (Crandell and Chambless, 1986). Therefore, it is the high intent category particularly those belonging to the older age group that needs to be separated and submitted for cognitive therapy because they are at a high risk with regards to future suicide attempts. A case to case analysis indicated that there were a few in the low intent category with intent scores of 7 or 8 scoring high on hopelessness and cognitions. Therefore, it is advisable to include all those who obtain a score of 7 and above in the high risk category needing therapeutic intervention.

Some of the women in the sample who scored very high on all the three parameters need a mention because of the culture-specific problems, they presented with, Mrs.K., housewife aged 30 attempted suicide after being deserted by her husband who chose to live with his paramour. Mrs.K., had little chance of remarrying since the society scorns women who remarry even if they are legally separated. Significantly, in this sample marital discord has been cited as the reason for the attempt in 7 cases of whom 6 are women.

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Mrs. G. housewife, aged 28, attempted a sort of extended suicide by administering an organophosphorous compound to self and 3 children, the reason being financial difficulties since her alcoholic husband was unable to provide for the family.

Mrs.S. widow, aged 58, attempted suicide within 15 days following the death of her husband of cancer. She was lonely and had no means of supporting herself. There are not many homes in this country for taking care of such destitute women.

Although the specific problems faced by these high intent attempters were different from those faced by attempters in the West, they all had one thing in common, i.e., the experience of pessimistic thoughts, negative cognitive phenomena and fairly severe degree of hopelessness.

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